

Application or Docket Number

APPLICATION AS FILED - PART I

(Column 2)

|   | (Column 1)  | (Column 2)   |
|---|---|--------------|
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| SIC FEE<br>OFR 1.16(a), (b), or (c))          |   |              |
| ARCH FEE<br>OFR 1.16(k), (l), or (m))         |   |              |
| MINIATION FEE<br>OFR 1.16(a), (p), or (q))    |   |              |
| AL CLAIMS<br>OFR 1.16(j))                     | minus 20 =  |              |
| DEPENDENT CLAIMS<br>OFR 1.16(h))              | minus 8 =   |              |
| LOCATION SIZE<br>FR 1.16(e))                  | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 OFR 1.16(e). |              |
| IPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(i)) |   |              |

OR. . OTHER THAN  
SMALL ENTITY

| RATE (\$) | FEE (\$) |
|-----------|----------|
|           |          |
|           |          |
|           |          |
| X         |          |
| X         |          |
|           |          |
|           |          |
|           |          |
| TOTAL     |          |

difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

| (Column 1)  |   | (Column 2) |   | (Column 3)       |
|---|---|------------|---|------------------|
|   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
| Total<br>OFR 1.16(i)  | 11  | Minus      | 20  | = 2              |
| dependent<br>OFR 1.16(ii)                                   | 2   | Minus      | 3   | = 2              |
| Application Size Fee (37 OFR 1.16(e))                       |   |            |   |                  |
| PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(i)) - |   |            |   |                  |

OR OTHER THAN  
SMALL ENTITY

| RATE (\$)          | ADDITIONAL FEE (\$) |
|--------------------|---------------------|
| x 50 =             | 3                   |
| x 200 =            |                     |
| 360                |                     |
| TOTAL<br>ADD'L FEE |                     |

|  | (Column 1)                                |       | (Column 2)                                  | (Column 3)       |
|--|---|-------|---|------------------|
|  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
| Total<br>1.16(II)  |   | Minus |   | =                |
| Amount<br>1.16(IV)   |   | Minus |   | =                |
| ation Size Fee (37 CFR 1.16(e))                            |   |       |   |                  |
| PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(V)). |   |       |   |                  |

O.R

| RATE (\$)       | ADDITIONAL FEE (\$) |
|-----------------|---------------------|
| X               | =                   |
| X               | =                   |
|                 |                     |
|                 |                     |
| TOTAL ADD'L FEE |                     |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.